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PTO/SB/83 (04-05)

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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/660,913
Filing Date	September 12, 2003
First Named Inventor	David Green
Art Unit	2673
Examiner Name	Unknown
Attorney Docket Number	48970-00602

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: The requestor's client has failed to pay one or more bills rendered by the practitioner for an unreasonable period of time. 37 CFR §10.40.

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	David Green				
Address	462 Spring Gate Blvd.				
City	Thornhill	State	Ontario	Zip	L4J5E1
Country	CANADA				
Telephone				Email	
Signature					
Name	Mark W. Rygiel			Registration No.	45,871
Date	June 21, 2005			Telephone No.	202-342-8400

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

# Collier Shannon Scott

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June 21, 2005



Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Re: U.S. Patent Application No.: 10/660,913**  
**For: METHOD AND APPARATUS FOR HUMAN INTERFACE WITH A**  
**COMPUTER**  
**Our Reference No.: 48970-00602**

Dear Sir:

Submitted herewith in connection with the above-identified matter is the following document:

Request for Withdrawal as Attorney or Agent & Change of Correspondence Address

Please date-stamp the enclosed copy of this letter, thereby acknowledging receipt of the above-identified document.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Mark W. Rygiel".

MARK W. RYGIEL, Reg. No. 45,871

Enclosure